Recording Requested By: When recorded mail document to: NAME ADDRESS CITY/STATE/ZIP

Signature \_\_\_\_\_

APN:

## Above Space for Recorder's Use Only **DECLARATION OF ABANDONMENT**

OF DECLARED HOMESTEAD	
The undersigned declare(s) that	
	(FULL NAME OF DECLARANTS(S)
on, 19	, and recorded on,
19, in Book, Page	_, as Instrument No, in
the Official Records of the County Recorder of California.	County,
Dated:, 19_	
(SIGNATURE OF DECLARANT)	(SIGNATURE OF DECLARANT)
(PRINT FULL NAME)	(PRINT FULL NAME)
STATE OF CALIFORNIA } COUNTY OF }	
ONbefore me,personally appeared	,a Notary Public,
name(s) is/are subscribed to the within he/she/they executed the same in his/the	nder the laws of the